

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 1
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) FAIR SHARE ACTION			FEC IDENTIFICATION NUMBER ▼ C C00526673		
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee MISSION CONTROL INC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y		
Mailing Address 624 HEBRON AVE BLDG 3 STE 200			Amount 15623.63		
City GLASTONBURY	State CT	Zip Code 06033	Transaction ID : SE.5651 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 19 / 2016		
Purpose of Expenditure CAMPAIGN LITERATURE AND SHIPPING		Category/ Type 004			
Name of Federal Candidate TRUMP, DONALD J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		1504748.79	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee MISSION CONTROL INC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y		
Mailing Address 624 HEBRON AVE BLDG 3 STE 200			Amount 5207.87		
City GLASTONBURY	State CT	Zip Code 06033	Transaction ID : SE.5652 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 19 / 2016		
Purpose of Expenditure CAMPAIGN LITERATURE AND SHIPPING		Category/ Type 004			
Name of Federal Candidate GLENN, DARRYL, ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO		
Calendar Year-To-Date Per Election for Office Sought		245579.53	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			20831.50		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			20831.50		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Wendlandt, Wendy, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 20 / 2016	